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FEC

## REPORT OF RECEIPTS AND DISBURSEMENTS

FORM 3		ISBURS Authorized C	Office Use Only			
1. NAME OF COMMITTEE (in	TYPE OR PR	INT ▼	Example: If typing, type over the lines.	12FE4M5		
FRIENDS OF JOHN PETERSON						
ADDRESS (number ar	nd street)	TE STREET	STREET			
Check if different than previously reported. (ACC)		/ILLE PA 16341				
2. <b>FEC IDENTIFIC</b>	CATION NUMBER	CITY <sup>*</sup>	<b>A</b>	STATE	ZIP CODE A STATE ▼ DISTRICT	
C C003118	52	3. IS THIS REPOR		AMENDED (A)	PA 05	
(a) Quarterly R April 15 July 15 X Octobe January	PORT (Choose One) eports: 5 Quarterly Report (Q1) Quarterly Report (Q2) r 15 Quarterly Report (Q3) r 31 Year-End Report (YE)	Election	POST-Election Report for th General (30G)	General (12G) Special (12S)	in the State of  Special (30S)  in the State of	
5. Covering Period 07 / 01 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y						
I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.  Type or Print Name of Treasurer H. Michael Vinopal						
Signature of Treasurer H. Michael Vinopal [Electronically Filed] Date						
NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. §437g.						
Office Use Only					FEC FORM 3 (Revised 02/2003)	